

Check the applicable box:

☒ **Lobbyist Employer Registration Statement**

☐ **Lobbying Coalition Registration Statement**

(Government Code Section 86105)

Type or Print in ink

Legislative Session

2009 2010
(Insert Years)

1/4

CALIFORNIA FORM **603**

FAIR POLITICAL PRACTICES COMM.

For Official Use Only

AMENDMENT 002

NAME OF LOBBYIST EMPLOYER OR LOBBYING COALITION:
AUTOMOBILE CLUB OF SOUTHERN CALIFORNIA/INTERINSURANCE EXCHANGE OF THE AU -
TOMOBILE CLUB/ACSC MANAGEMENT SERVICES INC.

If this is an initial registration, enter the
DATE QUALIFIED:

BUSINESS ADDRESS: (Number and Street) (City) (State) (Zip Code)

COSTA MESA CA 92626-1698

TELEPHONE NUMBER:

FAX NUMBER: (Optional)

(714) 885-1278

MAILING ADDRESS: (If different than above)

COSTA MESA CA 92626-1698

E-MAIL: (Optional)

bisno.alice@aaa-calif.com

I Lobbyists and Lobbying Firms Employed

* List the full name of each in-house lobbyist employed and each lobbying firm with which you contract.

Please see attached pages

II List Below the State Agencies Whose Actions you Will Attempt to Influence

* Will you attempt to influence the State Legislature? ☒ Yes ☐ No

Please see attached pages

III Description of Lobbying Interests

* For assistance, see the instructions on the back of this form or the "Information Manual on Lobbying Disclosure Provisions
of the Political Reform Act." Legislation and regulation relating to the ownership and operation of motor vehicles; motor club services; roads hig

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and to the best of my knowl-
edge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed On 04/21/2010
DATE

By Alice Bisno
SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer
TYPE OR PRINT

Title Senior Vice President

FPPC Form 603 (7/98)
For Technical Assistance: 916/322-5660

Lobbyist Employer/Lobbying Coalition Registration Statement

CALIFORNIA
FORM

603

FAIR POLITICAL PRACTICES COMM.

SEE INSTRUCTIONS ON REVERSE

Type or Print in ink

NAME OF LOBBYIST EMPLOYER OR LOBBYING COALITION:
AUTOMOBILE CLUB OF SOUTHERN CALIFORNIA/INTERINSURANCE EXCHANGE OF THE AU -
TOMOBILE CLUB/ACSC MANAGEMENT SERVICES INC.

2/4

Nature and Interests of Filer

Check one box only:

- ☐ INDIVIDUAL (Complete only Parts A and E) ☐ BUSINESS ENTITY (Complete only Parts B and E) ☐ INDUSTRY, TRADE OR PROFESSIONAL ASSN. (Complete only Parts C and E) ☒ OTHER (e.g., lobbying coalition) (Complete only Parts D and E)

A. Individual

1. Name and address of employer (or principal place of business if self-employed):

2. Description of business activity in which you or your employer are engaged:

B. Business Entity

Description of business activity in which engaged:

C. Industry, Trade or Professional Association

1. Description of industry, trade or profession represented:

2. Specific description of any portion or faction of the industry, trade or profession which the association exclusively or primarily represents:

3. Number of members in association (check appropriate box)

- ☐ 50 OR LESS (provide names of all members on an attachment.) ☐ MORE THAN 50

D. Other

1. Statement of nature and purposes:

Motor Club;Insurer;Attorney-in-Fact for reciprocal -
insurer.Legislation and regulation relating to owne -
rship and operation of motor vehicles. Transportat -
ionRoads highways and traffic safety.

2. Description of any trade, profession, or other group with a common economic interest which is principally represented or from which membership or financial support is principally derived:

E. Industry Group Classification

Check one box which most accurately describes the industry group which you represent. See instructions on reverse.

- ☐ AGRICULTURE ☐ LEGAL
☐ EDUCATION ☐ PUBLIC EMPLOYEES
☐ GOVERNMENT ☐ POLITICAL ORGANIZATIONS
☐ HEALTH ☐ UTILITIES
☐ LABOR UNIONS ☒ OTHER: _____
(Describe)

BUSINESS (Check one of the following sub-categories.)

- ☐ ENTERTAINMENT/RECREATION ☐ OIL AND GAS
☐ FINANCE/INSURANCE ☐ PROFESSIONAL/TRADE
☐ LODGING/RESTAURANTS ☐ REAL ESTATE
☐ MANUFACTURING/INDUSTRIAL ☐ TRANSPORTATION
☐ MERCHANDISE/RETAIL ☒ OTHER Motor CI -
ub (Describe)

Lobbyist Employer/Lobbying
Coalition Registration Statement

I Lobbyists and Lobbying Firms Employed

* List the full name of each in-house lobbyist employed and each lobbying firm with which you contract.

Employee Lobbyist
Larry D. Perrin
Employee Lobbyist
Tim Chang
Lobbying Firm
Knudsen & Associates

Lobbyist Employer/Lobbying
Coalition Registration Statement

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMM.	603
4/4	

II List Below the State Agencies Whose Actions you Will Attempt to Influence

Bus. Transp and Housing Agency CAARP Adv Pln Air Resources Board Board of Equalization Bureau of Automotive Repair
CA Fair Plan CIGA Dept. of Corp Dept. of Fin. CEA Calif. Energy Comm. CAL-EPA CHP CTC Calif. Trav. & Tourism Comm. Dept. of Cons. Affairs
Ofc of Traffic Safety State of Controllors Ofc Dept. of Insurance DMV Caltrans FPPC Office of the Governor
Office of the Ins. Advisor Office of the Attorney General
Department of Managed Health Care